Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10797302

70 77:300												
CLAIMS AS FILED - PART I								SMALL ENTITY OTHER TH				
TOTAL CLAIMS			(Column 1)		(Column 2)		TYPE		<u> </u>	OR	SMALL	ENTITY
TOTAL CLAIMS			4				ŀ	RATE	FEE	4	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	↓ mir	nus 20=	* -	_	,	X\$ 9=		OR	X\$18=	
INE	DEPENDENT C	LAIMS	4 minus 3 = *					X43=	داء	OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT						175			
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR	+290=	
								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II							OTHER THAN SMALL ENTITY OR SMALL ENTITY					
_		(Column 1)	1	(Colun	_			JIIIALL		9 I	OMALL	-14111
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> -</u>		X43=		OR	X86=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
								TOTAL		OB	TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE	_	Jon	ADDIT. FEE	
. 1		CLAIMS	1	HIGHE		(Column 3)	1 -					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Ŭ.,		
	111							+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	<u>, </u>
		(Column 1)										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	_	=		X43=	3	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE												
		ber Previously Paid					four	id in the app	ropriate box	in colu	ımn 1.	